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| Form 990  Department of the Treasury Internal Revenue Service | Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) | OMB No 1545-0047 <div> 2012 Open to Public Inspection </div> |
| | The organization may have to use a copy of this return to satisfy state reporting requirements | |

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

| | | | |
|--|--|------------|---|
| B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization Chamber of Commerce of the USA | | D Employer identification number 53-0045720 |
| | Doing Business As | | |
| | Number and street (or P O box if mail is not delivered to street address) 1615 H Street NW | Room/suite | E Telephone number (202) 463-5590 |
| | City or town, state or country, and ZIP + 4 Washington, DC 200622000 | | G Gross receipts \$ 188,706,313 |
| | F Name and address of principal officer Stan M Harrell 1615 H Street NW Washington, DC 200622000 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) |

I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (6) (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:  www.uschamber.com

| | | |
|---|---------------------------------|-------------------------------------|
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input type="checkbox"/> | L Year of formation 1915 | M State of legal domicile DC |
|---|---------------------------------|-------------------------------------|

Part I Summary

| | | | | |
|-----------------------------|--|--|--|---------------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities To advance human progress through an economic, (Please see Schedule O for the continuation)political, and social system based on individual freedom, incentive, opportunity and responsibility | | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets | | | |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) | 138 | |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 134 | |
| | 5 | Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 463 | |
| | 6 | Total number of volunteers (estimate if necessary) | 0 | |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 0 | |
| | b | Net unrelated business taxable income from Form 990-T, line 34 | 0 | |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | 137,025,565 | 179,378,925 |
| | 9 | Program service revenue (Part VIII, line 2g) | 2,137,020 | 2,045,463 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 1,132,730 | 8,251 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 7,077,040 | 6,942,125 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 147,372,355 | 188,374,764 |
| | Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 |
| 14 | | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| 15 | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 74,675,866 | 79,528,026 |
| 16a | | Professional fundraising fees (Part IX, column (A), line 11e) | 1,233,907 | 1,126,007 |
| b | | Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0 | | |
| 17 | | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 69,785,543 | 126,673,161 |
| 18 | | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 145,695,316 | 207,327,194 |
| 19 | | Revenue less expenses Subtract line 18 from line 12 | 1,677,039 | -18,952,430 |
| Net Assets or Fund Balances | | | | Beginning of Current Year |
| | 20 | Total assets (Part X, line 16) | 113,477,015 | 79,421,634 |
| | 21 | Total liabilities (Part X, line 26) | 142,754,745 | 138,038,999 |
| | 22 | Net assets or fund balances Subtract line 21 from line 20 | -29,277,730 | -58,617,365 |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| | | | | | | |
|-------------------------------|---|--|----------------------|--|---------------------------|--|
| Sign Here | Signature of officer | | | | 2013-11-12 | |
| | Stan M Harrell SVP, CFO & CIO Type or print name and title | | | | Date | |
| Paid Preparer Use Only | Print/Type preparer's name Jennifer Rhodenck | | Preparer's signature | | Date | |
| | Check <input type="checkbox"/> if self-employed | | PTIN P00395735 | | | |
| | Firm's name ▶ Ernst and Young US LLP | | | | Firm's EIN ▶ 34-6565596 | |
| | Firm's address ▶ 111 Monument Circle Ste 2600 Indianapolis, IN 46204 | | | | Phone no (317) 681-7000 | |

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization's mission

The Chamber of Commerce serves its members and the nation's business community by analyzing national economic and social issues and by helping legislators and national leaders to shape policies and proposals to foster the development of American business

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ including grants of \$) (Revenue \$)

Research and track issues affecting the business community and support pro-business legislation, regulations, and political activities

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

Enhance the competitiveness of business in the global marketplace Lobby for business' trade agendas and manage programs that educate American companies about trade opportunities

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

Work closely with associations and state and local chambers of commerce to build awareness of and involvement in top policy issues and generate grassroots momentum

(Code) (Expenses \$ including grants of \$) (Revenue \$)

Recruit and retain members and coordinate member relations

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

Form 990 (2012)

Part IV Checklist of Required Schedules

| | Yes | No |
|---|-----|-----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | No |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | Yes |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | Yes |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | Yes |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | No |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | No |
| 9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | No |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | No |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | Yes |
| b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | No |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | No |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Yes |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Yes |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | No |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Yes |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Yes |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | No |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | Yes |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | No |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | No |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | |

Part IV

Checklist of Required Schedules (continued)

| | | | | |
|-----|--|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | | No |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | Yes | |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | | No |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | Yes | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | Yes | |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 | Yes | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Yes | |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | Yes | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

| | | | | | | |
|---|---|-----|-----|--|--|----|
| | | Yes | No | | | |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 1a | 373 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 1b | 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. | 2a | 463 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | 2b | Yes | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Yes | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. | 3b | Yes | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | Yes | | | |
| b | If "Yes," enter the name of the foreign country: IN See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | | | No |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | Yes | | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | Yes | | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year. | 7d | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | | | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | | | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | | | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | |
| 10 Section 501(c)(7) organizations. Enter | | | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12. | 10a | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. | 10b | | | | |
| 11 Section 501(c)(12) organizations. Enter | | | | | | |
| a | Gross income from members or shareholders. | 11a | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). | 11b | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | 12b | | | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. | 13a | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. | 13b | | | | |
| c | Enter the amount of reserves on hand. | 13c | | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | | | No |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | | | |

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

| | | | |
|--|---|-----|-----|
| | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | |
| 1a | 138 | | |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | |
| 1b | 134 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | Yes |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | No |
| 6 | Did the organization have members or stockholders? | 6 | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | |
| a | The governing body? | 8a | Yes |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | No |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | | | |
|--|--|-----|-----|
| | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | No |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | No |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes |
| b | Other officers or key employees of the organization | 15b | Yes |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | No |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | |

Section C. Disclosure

| | | |
|----|--|---|
| 17 | List the States with which a copy of this Form 990 is required to be filed | DC |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O) | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization | Stan M Harrell 1615 H Street NW Washington, DC (202) 463-5590 |

Check if Schedule O contains a response to any question in this Part VII ☐

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

| | | | | |
|-----------|--|------------|---|-----------|
| 1b | Sub-Total | | | |
| c | Total from continuation sheets to Part VII, Section A | | | |
| d | Total (add lines 1b and 1c) | 19,679,851 | 0 | 1,369,424 |

\$100,000 of reportable compensation from the organization▶153

| | | Yes | No |
|----------|---|--------------|----|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 Yes | |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | 4 Yes | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | 5 | No |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| Revolution Media 1020 Princess Street Alexandria VA 22314 | Advertising services | 23,365,676 |
| Craft Media Digital 1600 K Street NW Washington DC 20006 | Advertising services | 8,718,330 |
| Designated Market Media LLC 3299 K Street NW Washington DC 20007 | Advertising services | 8,267,709 |
| Something Else Strategies LLC 112 Lantern Ridge Drive Easley SC 29642 | Advertising services | 2,773,205 |
| Smart Media Group 814 King Street Alexandria VA 22314 | Advertising services | 2,650,000 |

\$100,000 of compensation from the organization ■78

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|--|--|----------------------|--|---|---|--------|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns . . . | 1a | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | 499,992 | | | |
| | e | Government grants (contributions) | 1e | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 178,878,933 | | | |
| | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h | Total. Add lines 1a-1f | | 179,378,925 | | | |
| Program Service Revenue | | | Business Code | | | | |
| | 2a | Sponsorships/royalties | 711190 | 944,354 | 944,354 | | |
| | b | Meetings | 900099 | 676,149 | 676,149 | | |
| | c | Publication sales | 511190 | 406,786 | 406,786 | | |
| | d | Accreditation fees | 541900 | 18,174 | 18,174 | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | Total. Add lines 2a-2f | | 2,045,463 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | 8,251 | | | 8,251 | |
| | 4 | Income from investment of tax-exempt bond proceeds . . | | | | | |
| | 5 | Royalties | | | | | |
| | 6a | (i) Real | | 84,506 | | | 84,506 |
| | | (ii) Personal | | | | | |
| | | 215,891 | | | | | |
| | | 200,164 | | | | | |
| | b | Less rental expenses | 0 | 331,549 | | | |
| | c | Rental income or (loss) | 215,891 | -131,385 | | | |
| | d | Net rental income or (loss) | | | | | |
| | 7a | (i) Securities | | | | | |
| | | (ii) Other | | | | | |
| | | | | | | | |
| | | | | | | | |
| | b | Less cost or other basis and sales expenses | | | | | |
| | c | Gain or (loss) | | | | | |
| | d | Net gain or (loss) | | | | | |
| | 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | a | | | | |
| | b | Less direct expenses | b | | | | |
| | c | Net income or (loss) from fundraising events . . | | | | | |
| | 9a | Gross income from gaming activities See Part IV, line 19 | a | | | | |
| | b | Less direct expenses | b | | | | |
| | c | Net income or (loss) from gaming activities . . | | | | | |
| 10a | Gross sales of inventory, less returns and allowances | a | | | | | |
| b | Less cost of goods sold | b | | | | | |
| c | Net income or (loss) from sales of inventory . . | | | | | | |
| Miscellaneous Revenue | | Business Code | | | | | |
| 11a | Affiliate admin charge | 561000 | 6,849,732 | 6,849,732 | | | |
| b | Miscellaneous revenue | 900099 | 7,887 | 7,887 | | | |
| c | | | | | | | |
| d | All other revenue | | | | | | |
| e | Total. Add lines 11a-11d | | 6,857,619 | | | | |
| 12 | Total revenue. See Instructions | | 188,374,764 | 8,903,082 | 0 | 92,757 | |

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21. | | | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22. | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16. | | | | |
| 4 | Benefits paid to or for members. | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees. | 13,998,724 | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). | | | | |
| 7 | Other salaries and wages. | 49,839,814 | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). | 9,496,407 | | | |
| 9 | Other employee benefits. | 2,553,310 | | | |
| 10 | Payroll taxes. | 3,639,771 | | | |
| 11 | Fees for services (non-employees): | | | | |
| a | Management. | 1,835,498 | | | |
| b | Legal. | 1,844,661 | | | |
| c | Accounting. | 550,575 | | | |
| d | Lobbying. | 13,374,864 | | | |
| e | Professional fundraising services. See Part IV, line 17. | 1,126,007 | | | |
| f | Investment management fees. | | | | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). | 9,063,113 | | | |
| 12 | Advertising and promotion. | 57,042,380 | | | |
| 13 | Office expenses. | 5,972,827 | | | |
| 14 | Information technology. | 8,141,151 | | | |
| 15 | Royalties. | | | | |
| 16 | Occupancy. | 7,173,811 | | | |
| 17 | Travel. | 9,073,062 | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials. | | | | |
| 19 | Conferences, conventions, and meetings. | 4,661,772 | | | |
| 20 | Interest. | 1,118,645 | | | |
| 21 | Payments to affiliates. | | | | |
| 22 | Depreciation, depletion, and amortization. | 3,084,369 | | | |
| 23 | Insurance. | | | | |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O): | | | | |
| a | Contr to other orgs. | 2,784,709 | | | |
| b | Bad debt expense. | 532,000 | | | |
| c | Contr to affiliates. | 416,974 | | | |
| d | Taxes. | 2,750 | | | |
| e | All other expenses. | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e. | 207,327,194 | | | |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). | | | | |

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

| | | | | (A) | | (B) |
|-----------------------------|---|--|---------------|-------------------|-----|--------------|
| | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | 55,675,130 | 1 | 29,473,560 |
| | 2 | Savings and temporary cash investments | | 10,165,552 | 2 | |
| | 3 | Pledges and grants receivable, net | | 27,942,164 | 3 | 30,562,131 |
| | 4 | Accounts receivable, net | | 38,940 | 4 | 46,595 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 7 | |
| | 8 | Inventories for sale or use | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 1,160,871 | 9 | 1,339,223 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a42,914,810 | | | |
| | b | Less accumulated depreciation | 10b24,917,129 | 18,491,914 | 10c | 17,997,681 |
| | 11 | Investments—publicly traded securities | | 2,444 | 11 | 2,444 |
| | 12 | Investments—other securities See Part IV, line 11 | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | 113,477,015 | 16 | 79,421,634 |
| Liabilities | 17 | Accounts payable and accrued expenses | | 16,243,585 | 17 | 20,231,208 |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | 27,000 | 19 | 750 |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 20,260,070 | 23 | 16,540,625 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | 106,224,090 | 25 | 101,266,416 |
| | 26 | Total liabilities. Add lines 17 through 25 | | 142,754,745 | 26 | 138,038,999 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | |
| | 27 | Unrestricted net assets | | -94,562,293 | 27 | -127,140,984 |
| | 28 | Temporarily restricted net assets | | 65,284,563 | 28 | 68,523,619 |
| | 29 | Permanently restricted net assets | | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | 32 | |
| | 33 | Total net assets or fund balances | | -29,277,730 | 33 | -58,617,365 |
| | 34 | Total liabilities and net assets/fund balances | | 113,477,015 | 34 | 79,421,634 |

Part XI

Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

☒

| | | | |
|----|---|----|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 188,374,764 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 207,327,194 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | -18,952,430 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | -29,277,730 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | -10,387,205 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | -58,617,365 |

Part XII

Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

☐

| | | Yes | No |
|----|--|-----|-----|
| 1 | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | No |
| 2b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | Yes |
| 2c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | 2c | Yes |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | No |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | |

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

If the organization answered “Yes” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

| | |
|--|--|
| Name of the organization Chamber of Commerce of the USA | Employer identification number 53-0045720 |
|--|--|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

| | | |
|---|--|-----------------|
| 1 | Provide a description of the organization’s direct and indirect political campaign activities in Part IV | |
| 2 | Political expenditures | ▶ \$ 53,890,623 |
| 3 | Volunteer hours | |

Part I-B Complete if the organization is exempt under section 501(c)(3).

| | | | |
|----|---|------|--|
| 1 | Enter the amount of any excise tax incurred by the organization under section 4955 | ▶ \$ | |
| 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 | ▶ \$ | |
| 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b | If “Yes,” describe in Part IV | | |

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

| | | | |
|---|---|------|---|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities | ▶ \$ | 53,790,623 |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | ▶ \$ | 100,000 |
| 3 | Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b | ▶ \$ | 53,890,623 |
| 4 | Did the filing organization file Form 1120-POL for this year? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 5 | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV | | |

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|----------------------------------|-------------------------------|------------|---|--|
| (1) Parents for Education Reform | PO Box 9925 Boise,ID 83707 | 46-1035649 | 50,000 | |
| (2) Yes for Idaho Education | PO Box 1697 Boise,ID 83701 | 46-1117787 | 50,000 | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|--|---|---|------------------------------------|--------------------|------------------------------|---|---|---|---|--|--|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | | | | | | | | | | | | | | |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- | | | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. | | (a) | | (b) |
|---|--|-----|----|--------|
| | | Yes | No | Amount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | |
| a | Volunteers? | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | |
| c | Media advertisements? | | | |
| d | Mailings to members, legislators, or the public? | | | |
| e | Publications, or published or broadcast statements? | | | |
| f | Grants to other organizations for lobbying purposes? | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i | Other activities? | | | |
| j | Total. Add lines 1c through 1i. | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912. | | | |
| c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912. | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

| | Yes | No |
|---|-----|-----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | 1 | No |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | No |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 | Yes |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

| | | | |
|---|--|----|-------------|
| 1 | Dues, assessments and similar amounts from members | 1 | 167,036,815 |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a | Current year | 2a | 103,318,189 |
| b | Carryover from last year | 2b | -39,075,893 |
| c | Total | 2c | 64,242,296 |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | 108,115,686 |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | 5 | -43,873,390 |

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|-----------------------------------|------------------|--|
| Part IV, Supplemental Information | | The Chamber engaged in public education activities in support of its mission, which includes advancing the interests and concerns of business, economic growth, and the free enterprise system. In pursuit of these goals, the Chamber spends funds directly, or works with other organizations with similar missions. |

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

| | |
|--|--|
| Name of the organization Chamber of Commerce of the USA | Employer identification number 53-0045720 |
|--|--|

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|--|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

| | |
|--|-----------------------------|
| | Held at the End of the Year |
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1

► \$ _____

b Assets included in Form 990, Part X

► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

| | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|----|--|---------------|---------------------|---------------------|--------------------|
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Net investment earnings, gains, and losses | | | | |
| d | Grants or scholarships | | | | |
| e | Other expenditures for facilities and programs | | | | |
| f | Administrative expenses | | | | |
| g | End of year balance | | | | |

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | 801,756 | | 801,756 |
| b Buildings | | 28,271,637 | 12,786,017 | 15,485,620 |
| c Leasehold improvements | | 949,321 | 799,477 | 149,844 |
| d Equipment | | 5,501,913 | 4,006,355 | 1,495,558 |
| e Other | | 7,390,183 | 7,325,280 | 64,903 |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 17,997,681 |

Schedule D (Form 990) 2012

| | | | | | |
|---|--|-----------|------------|-----------|-------------|
| Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return | | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 249,272,011 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | 2e | |
| a | Net unrealized gains on investments | 2a | | | |
| b | Donated services and use of facilities | 2b | 1,020,661 | | |
| c | Recoveries of prior year grants | 2c | | | |
| d | Other (Describe in Part XIII) | 2d | 68,714,129 | | |
| e | Add lines 2a through 2d | | | 2e | 69,734,790 |
| 3 | Subtract line 2e from line 1 | | | 3 | 179,537,221 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | | 4c | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII) | 4b | 8,837,543 | | |
| c | Add lines 4a and 4b | | | | |
| 5 | Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12) | | | 5 | 188,374,764 |
| Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return | | | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 267,389,486 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | 2e | |
| a | Donated services and use of facilities | 2a | 1,020,661 | | |
| b | Prior year adjustments | 2b | | | |
| c | Other losses | 2c | | | |
| d | Other (Describe in Part XIII) | 2d | 67,879,176 | | |
| e | Add lines 2a through 2d | | | 2e | 68,899,837 |
| 3 | Subtract line 2e from line 1 | | | 3 | 198,489,649 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 : | | | 4c | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | | |
| b | Other (Describe in Part XIII) | 4b | 8,837,545 | | |
| c | Add lines 4a and 4b | | | | |
| 5 | Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18) | | | 5 | 207,327,194 |

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier | Return Reference | Explanation |
|---|------------------|---|
| Description of Uncertain Tax Positions Under FIN 48 | Part X, Line 2 | FIN 48 footnote from 2012 audit. Management's analysis of uncertain tax positions as required under the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 740, Income Taxes, determined that the Chamber had no uncertain tax positions and as such, no liability has been recorded as of December 31, 2012 and 2011. Management does not anticipate any material changes in this position in the next 12 months. |
| Part XI, Line 2d - Other Adjustments | | Affiliated org rev consolidated for financial statement purpose \$68,382,580. Rental expenses to line 6b on 990, \$331,549. Rounding. |
| Part XI, Line 4b - Other Adjustments | | Elimination entries \$8,837,543. |
| Part XII, Line 2d - Other Adjustments | | Affiliated org exp consolidated for financial statement purpose \$67,547,627. Rental Expenses to line 6b on 990, \$331,549. |
| Part XII, Line 4b - Other Adjustments | | Elimination entries \$8,837,543. Rounding \$2. |

1

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐ Yes

☒ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes

☒ No

Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

[illegible]

Additional Data

Software ID:
Software Version:
EIN: 53-0045720
Name: Chamber of Commerce of the USA

Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service (s) in region | (f) Total expenditures for region |
|---|-------------------------------------|---|--|---|-----------------------------------|
| South Asia | 1 | 17 | Fundraising and programs services | Membership benefits | 288,880 |
| Europe | 1 | 1 | Member services in Europe | Business advocacy in Europe | 468,485 |
| East Asia and the Pacific | 0 | 0 | Seminars and speaking engagements | Business advocacy in East Asia | 741,682 |
| Europe | 0 | 0 | Seminars and speaking engagements | Business advocacy in Europe | 591,254 |
| South America | 0 | 0 | Seminars and speaking engagements | Business advocacy in South America | 217,134 |
| Middle East and North Africa | 0 | 0 | Seminars and speaking engagements | Business advocacy in the Middle East | 179,672 |
| South Asia | 0 | 0 | Seminars and speaking engagements | Business advocacy in South Asia | 155,081 |
| North America | 0 | 0 | Seminars and speaking engagements | Business advocacy in North America | 105,098 |
| Sub Saharan Africa | 0 | 0 | Seminars and speaking engagements | Business advocacy in Sub Saharan Africa | 40,047 |
| Central America and the Caribbean - | 0 | 0 | Seminars and speaking engagements | Business advocacy in Central America | 8,553 |
| Russia and the Newly Independent States | 0 | 0 | Seminars and speaking engagements | Business advocacy in Russia and the former USSR | 7,908 |
| East Asia and the Pacific | 0 | 20 | Program services | Policy analysis in East Asia | 517,870 |
| Europe | 0 | 26 | Program services | Policy analysis in Europe | 387,824 |
| North America | 0 | 26 | Program services | Policy analysis in North America | 163,626 |
| South America | 0 | 21 | Program services | Policy analysis in South America | 143,143 |
| Middle East and North Africa - | 0 | 14 | Program services | Policy analysis in Middle East | 140,136 |
| South Asia | 0 | 22 | Program services | Policy analysis in South Asia | 21,350 |
| Sub Saharan Africa | 0 | 1 | Program services | Policy analysis in Africa | 11,800 |

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
Chamber of Commerce of the USA

Employer identification number

53-0045720

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒ Mail solicitations

e

☐ Solicitation of non-government grants

b

☒ Internet and email solicitations

f

☐ Solicitation of government grants

c

☒ Phone solicitations

g

☐ Special fundraising events

d

☒ In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? | | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
|---|---------------------|--|----|-----------------------------------|--|---|
| | | Yes | No | | | |
| Carol Hallett 1615 H ST NW Washington, DC 20062 | General fundraising | | No | 7,600,000 | 436,711 | 7,163,289 |
| R James Nicholson 1615 H ST NW Washington, DC 20062 | General fundraising | | No | 4,000,000 | 488,031 | 3,511,969 |
| Stacey Lukens 1615 H ST NW Washington, DC 20062 | General fundraising | | No | 3,000,000 | 201,265 | 2,798,735 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total ▶ | | | | 14,600,000 | 1,126,007 | 13,473,993 |

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col (a) through col (c)) |
|-----------------|----|--|--------------|------------------|--|
| | | (event type) | (event type) | (total number) | |
| Revenue | 1 | Gross receipts | | | |
| | 2 | Less Contributions . . . | | | |
| | 3 | Gross income (line 1 minus line 2) | | | |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Noncash prizes . . . | | | |
| | 6 | Rent/facility costs . . . | | | |
| | 7 | Food and beverages . | | | |
| | 8 | Entertainment | | | |
| | 9 | Other direct expenses . | | | |
| | 10 | Direct expense summary Add lines 4 through 9 in column (d) ▶ | | | |
| | 11 | Net income summary Combine line 3, column (d), and line 10 ▶ | | | |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col (a) through col (c)) |
|-----------------|---|---|--|--|--|
| | | | | | |
| Direct Expenses | 1 | Gross revenue | | | |
| | 2 | Cash prizes | | | |
| | 3 | Non-cash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses | | | |
| | 6 | Volunteer labor <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | 7 | Direct expense summary Add lines 2 through 5 in column (d) ▶ | | | |
| | 8 | Net gaming income summary Combine lines 1 and 7 in column (d) ▶ | | | |

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in



| | | |
|-------------------------------|-----|--|
| a The organization's facility | 13a | |
| b An outside facility | 13b | |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name 

Address 

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No


b If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____


c If "Yes," enter name and address of the third party

Name 

Address 

16 Gaming manager information

Name 


Gaming manager compensation  \$

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
Chamber of Commerce of the USA

Employer identification number
53-0045720

| Part I | Questions Regarding Compensation | | Yes | No |
|--------|--|----|-----|----|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> | | | |
| b | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | Yes | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | Yes | |
| 3 | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div> | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | 4a | | No |
| | | 4b | Yes | |
| | | 4c | | No |
| | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III. | 5a | | |
| | | 5b | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III. | 6a | | |
| | | 6b | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III. | 7 | | |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. | 8 | | |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | | |

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---------------------------|--|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| See Additional Data Table | | | | | | | | |

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|---|
| | Part I, Line 1a | Part I, Line 1a Charter air travel is provided to two of the individuals listed, a portion of which is treated as taxable compensation. First class business travel is available to the President/CEO, and designated employees. Ten of the individuals listed in Part VII of the core form utilized first class travel at least once. Travel for companions is available for business purposes only, when companions are invited and expected to attend. Ten of the individuals listed in Part VII of the core form utilized travel for companions at least once. None of these are treated as taxable benefits. Gross up payments are added to supplemental pension benefits. These benefits are reported as taxable benefits and are available to all employees with compensation exceeding the ERISA limit. Social club dues are available to eight of the individuals listed in Part VII of the core form for business use only. They are not treated as taxable benefits. Chauffeur services are available to two of the individuals listed in Part VII of the core form for business use only. They are not treated as taxable benefits. |
| | Part I, Line 4b | Supplemental Pension list Robert Bruce Josten 445,636 Agnes Warfield 205,848 David Chavern 189,349 Myron Brilliant 144,718 David Hirschmann 137,066 Carl Grant 104,047 Shannon DiBari 88,319 Stan Harrell 74,250 Thomas Collamore 74,048 Karen Harbert 52,619 Robert Engstrom 24,272 Lily Fu Claffee 23,057 The Supplemental Pension Plan provides cash payments to participants based on a formula that coordinates with the benefits that cannot be paid by the Retirement Plan due to the qualified plan pay cap under the law. These benefits are calculated and paid annually, there is no deferred component. |

Software ID:

Software Version:

EIN: 53-0045720

Name: Chamber of Commerce of the USA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|----------------------|------|--|-------------------------------------|--------------------------|---------------------------|-------------------------|---------------------------------|--|
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | | | | |
| Thomas J Donohue | (i) | 1,053,312 | 4,250,000 | 149,000 | 15,100 | 15,285 | 5,482,697 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Greg Lebedev | (i) | 180,000 | 0 | 0 | 1,700 | 0 | 181,700 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Lily Fu Clafee | (i) | 598,341 | 300,000 | 25,937 | 16,250 | 8,420 | 948,948 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Stan M Harrell | (i) | 396,142 | 150,000 | 77,130 | 124,400 | 17,081 | 764,753 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| David Chavern | (i) | 497,841 | 875,000 | 189,349 | 75,700 | 15,487 | 1,653,377 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Shannon DiBari | (i) | 296,613 | 200,000 | 91,199 | 252,800 | 5,548 | 846,160 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Robert J Engstrom | (i) | 275,088 | 150,000 | 27,152 | 70,900 | 6,080 | 529,220 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bruce Josten | (i) | 592,047 | 875,000 | 448,516 | 223,200 | 18,984 | 2,157,747 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Agnes Warfield-Blanc | (i) | 714,392 | 2,000,000 | 208,728 | 26,250 | 18,906 | 2,968,276 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Myron A Brilliant | (i) | 343,365 | 475,000 | 147,598 | 133,400 | 19,568 | 1,118,931 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Thomas J Collamore | (i) | 493,137 | 650,000 | 76,929 | 26,250 | 20,161 | 1,266,477 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Carl N Grant | (i) | 390,942 | 300,000 | 116,177 | 42,100 | 19,835 | 869,054 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Karen A Harbert | (i) | 396,210 | 450,000 | 55,499 | 26,250 | 16,863 | 944,822 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| David T Hirschmann | (i) | 349,261 | 525,000 | 139,946 | 141,300 | 3,706 | 1,159,213 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Daniel Christman | (i) | 150,000 | 0 | 0 | 7,900 | 0 | 157,900 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
Chamber of Commerce of the USA

Employer identification number

53-0045720

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

| 1 | (a) Name of disqualified person | (b) Relationship between disqualified person and organization | (c) Description of transaction | (d) Corrected? | |
|---|---------------------------------|---|--------------------------------|----------------|----|
| | | | | Yes | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

| (a) Name of interested person | (b) Relationship with organization | (c) Purpose of loan | (d) Loan to or from the organization? | | (e) Original principal amount | (f) Balance due | (g) In default? | | (h) Approved by board or committee? | (i) Written agreement? | |
|-------------------------------|------------------------------------|---------------------|---------------------------------------|------|-------------------------------|-----------------|-----------------|----|-------------------------------------|------------------------|----|
| | | | To | From | | | Yes | No | | Yes | No |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Total ▶ \$ | | | | | | | | | | | |

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of assistance | (d) Type of assistance | (e) Purpose of assistance |
|-------------------------------|---|--------------------------|------------------------|---------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|--|---------------------------|---|---|----|
| | | | | Yes | No |
| (1) PEPCO Holdings | Joseph M Rigby (Board member and an officer of Pepco) | 484,772 | Electricity bills | | No |
| (2) Spencer Stuart | Kevin M Connelly (Board member and an officer of Spencer Stuart) | 364,591 | Executive search consulting services | | No |
| (3) Gregori Lebedev | Consultant (Former board member) | 180,000 | Provide advice on International Affairs | | No |
| (4) Leading Authorities | Mark French (Board member and an officer of Leading Authorities) | 162,289 | Provide speaker services | | No |
| (5) Dan Christman | Consultant (Former key employee) | 150,000 | Provide advice on International Affairs | | No |
| | | | | | |

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

Chamber of Commerce of the USA

Employer identification number

53-0045720

| Identifier | Return Reference | Explanation |
|------------|--------------------------------------|---|
| | Form 990, Part VI, Section A, line 2 | Thomas J Donohue, William G Little, and Paul J Klaasen all served on the Sunrise Senior Living Board in 2012 David Chavern and Donald J Shepard both served on the Aegon USA Board together in 2012 Thomas D Bell served as a director at Norfolk Southern Corporation while James A Hixon served as an officer in 2012 |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|---|
| | Form 990, Part VI, Section B, line 11 | In accordance with the Audit Committee charter, the draft Form 990 was provided in advance to the Audit Committee members, and reviewed individually with each member prior to filing. The Audit Committee performs this function pursuant to a delegation from the Board of Directors. The board reviews the most recently completed tax return at each of its regularly scheduled meetings. |

| Identifier | Return Reference | Explanation |
|------------|---|--|
| | Form 990, Part VI, Section B, line 12c | We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any transaction or relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the attention of a supervisor, a senior manager in the Human Resources department or the Office of General Counsel. In addition, we issue an annual written questionnaire to all members of the board of directors asking for information on potential conflicts of interest, which is gathered by the chief financial officer. All reports of potential conflicts will be evaluated by the Chief Legal Officer and General Counsel, who serves as the Chamber's Ethics Officer, in consultation with other senior management and staff, as appropriate. Any conflicts of interest involving board members or staff that cannot be resolved in accordance with the Chamber's conflicts policies shall be elevated to the Chair of the Chamber's Audit Committee for further consideration and action. |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|--|
| | Form 990, Part VI, Section B, line 15 | <p>Part VI Question 15a The process for determining the total compensation of the President/CEO is as follows The President/CEO has a written employment agreement with the Chamber Total compensation is reviewed annually by an independent compensation consultant The consultant prepares a compensation study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities Based on this information, total compensation is determined by the U S Chamber's Employee Compensation and Benefit Arrangements Committee on an annual basis</p> <p>Part VI Question 15b The process for determining total compensation for the officers, key employees and highly compensated employees is as follows For six individuals, who are direct reports of the President/CEO, total compensation is reviewed annually by an independent compensation consultant The consultant prepares a compensation study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities For the remaining six individuals, this consultant provides compensation information based on surveys of comparable organizations with similar positions Based on this information, total compensation is determined by the President/CEO and the U S Chamber of Commerce's Employee Compensation and Benefit Arrangements Committee on an annual basis</p> |

| Identifier | Return Reference | Explanation |
|------------|---------------------------------------|--|
| | Form 990, Part VI, Section C, line 19 | Form 990, Part VI, Section C, Line 19 The form 990 is made available to any member of the public who requests a copy Any requestor is forwarded to the Administrative Director of Finance, who will forward a copy of the document to the requestor The organization's governing documents, conflict of interest policy, and financial statements are not made available to the public Form 990, Part IV Question 12 Auditing of financial statements The U S Chamber of Commerce is the parent organization in the audited consolidated financial statements of the U S Chamber of Commerce Schedule R lists additional related organizations included in these consolidated financial statements |

| Identifier | Return Reference | Explanation |
|--|---------------------------|--|
| Changes in Net Assets or Fund Balances | Form 990, Part XI, line 9 | Minimum Pension Reserve Liability Adjustment \$8,840,720 -8840720 Minimum Post Retirement Reserve Liability Adjustment \$1,546,486 -1546486 Rounding \$1 1 |

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
Chamber of Commerce of the USA

Employer identification number
53-0045720

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|--------------------------------------|--|---------------------|---------------------------|----------------------------------|
| (1) ChamberBiz 1615 H ST NW Washington, DC 20062 54-1960202 | Small business web portal (inactive) | DC | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|---|--|--|----------------------------|---|----------------------------------|--|----|
| | | | | | | Yes | No |
| (1) National Chamber Foundation 1615 H St NW Washington, DC 20062 52-6073268 | Promotes understanding of public affairs issues affecting business | DC | 501(c)(3) | 7 | Chamber of Commerce of the USA | Yes | |
| (2) Policy Forum Endowment Fund 1615 H St NW Washington, DC 20062 45-4612611 | Supporting organization for the benefit of NCF | DE | 501(c)(3) | 11a | National Chamber Foundation | Yes | |
| (3) Business Civic Leadership Center 1615 H St NW Washington, DC 20062 52-2246743 | The voice of business for social and philanthropic interests | DC | 501(c)(3) | 7 | N/A | Yes | |
| (4) Institute for a Competitive Workforce 1615 H St NW Washington, DC 20062 52-1677141 | Promotes education and workforce training | DC | 501(c)(3) | 7 | N/A | Yes | |
| (5) US Chamber of Commerce Foundation 1615 H St NW Washington, DC 20062 46-1561597 | Promotes understanding of public affairs issues affecting business | DE | 501(c)(3) | 7 | Chamber of Commerce of the USA | Yes | |
| | | | | | | | |
| | | | | | | | |

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|--|--|--|---------------------------------|--|---|----|--|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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| | | | | | | | | | | | | |

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end- of-year assets | (h) Percentage ownership | (i) Section 512 (b)(13) controlled entity? | |
|--|-------------------------|---|-------------------------------------|---|---------------------------------|---|--------------------------------|--|----|
| | | | | | | | | Yes | No |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

Yes

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

Yes

1o

Yes

1p

No

1q

Yes

1r

No

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| (a) Name of other organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|-----------------------------------|----------------------------------|------------------------|--|
| See Additional Data Table | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Schedule R (Form 990) 2012

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

Additional Data

Software ID:

Software Version:

EIN: 53-0045720

Name: Chamber of Commerce of the USA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| David Adkisson Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Harry C Alford Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Anthony J Allott Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Stewart Alvarez Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| John W Bachmann Treasurer/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Charles E Barnes Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Hector V Barreto Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Lane Beattie Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Sandra Beaty Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Kathy G Beckett Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Thomas D Bell Chairman Comp Comm/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Jorge L Benitez Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Gary C Bhojwani Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Daniel J Bryant Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Chuck Brymer Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| John Cannon Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Red Cavaney Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Norman C Chambers Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James W Cicconi Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ken W Cole Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Kevin M Connelly Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Adam Cooper Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Charles Copeland Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Donald L Correll Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Joseph W Craft Director | 1 00 | X | | | | | | 0 | 0 | 0 |

Software ID:

Software Version:

EIN: 53-0045720

Name: Chamber of Commerce of the USA

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

| (a) Name of other organization | (b) Transaction type(a-s) | (c) Amount Involved | (d) Method of determining amount involved |
|---------------------------------------|---------------------------------|------------------------|---|
| National Chamber Foundation | O | 2,051,012 | Actual salaries & benefit alloc |
| National Chamber Foundation | N | 399,996 | Cost allocation |
| National Chamber Foundation | Q | 610,606 | Computation by agreement |
| National Chamber Foundation | E | 111,676 | Calculated interest |
| National Chamber Foundation | B | 100,167 | Actual expense |
| Policy Forum Endowment Fund | E | 316,094 | Intercompany loan |
| Business Civic Leadership Center | O | 1,241,669 | Actual salaries & benefit alloc |
| Business Civic Leadership Center | N | 250,000 | Alloc amt at 67% disc & act cost |
| Business Civic Leadership Center | Q | 100,000 | Alloc amt at 67% disc & act cost |
| Institute for a Competitive Workforce | O | 461,315 | Actual salaries & benefit alloc |
| Institute for a Competitive Workforce | N | 110,004 | Alloc amt at 67% disc & act cost |
| Institute for a Competitive Workforce | Q | 348,560 | Alloc amt at 67% disc & act cost |

Form **4562**
Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2012

Attachment
Sequence No **179**

Name(s) shown on return
Chamber of Commerce of the USA

Business or activity to which this form relates
Form 990 Page 10

Identifying number

53-0045720

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|---|--|---|-----------|
| 1 | Maximum amount (see instructions) | 1 | 500,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,000,000 |
| 4 | Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | 5 | |

| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost | |
|----|---|------------------------------|------------------|--|
| 6 | | | | |
| 7 | Listed property Enter the amount from line 29 | 7 | | |
| 8 | Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | 8 | | |
| 9 | Tentative deduction Enter the smaller of line 5 or line 8 | 9 | | |
| 10 | Carryover of disallowed deduction from line 13 of your 2011 Form 4562 | 10 | | |
| 11 | Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11 | | |
| 12 | Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 | 12 | | |
| 13 | Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12 | 13 | | |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

| | | | |
|----|---|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | |

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

| | | | |
|----|---|----|--|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2012 | 17 | |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here | | |

Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only—see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs | | S/L | |
| h Residential rental property | | | 27 5 yrs | MM | S/L | |
| | | | 27 5 yrs | MM | S/L | |
| i Nonresidential real property | | | 39 yrs | MM | S/L | |
| | | | | MM | S/L | |

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|----------------|--|--|--------|----|-----|--|
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs | | S/L | |
| c 40-year | | | 40 yrs | MM | S/L | |

Part IV Summary (see instructions)

| | | | |
|----|--|----|---|
| 21 | Listed property Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions | 22 | 0 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

| | | | | | | | | | |
|--|-------------------------------|--|----------------------------|--|------------------------|---|--------------------------------|---------------------------------|--|
| 24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | 24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation/ deduction | (i) Elected section 179 cost | |
| 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) | | | | | | | 25 | | |
| 26 Property used more than 50% in a qualified business use | | | | | | | | | |
| | | % | | | | | | | |
| | | % | | | | | | | |
| | | % | | | | | | | |
| 27 Property used 50% or less in a qualified business use | | | | | | | | | |
| | | % | | | | S/L - | | | |
| | | % | | | | S/L - | | | |
| | | % | | | | S/L - | | | |
| 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 | | | | | | 28 | | | |
| 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 | | | | | | | 29 | | |

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

| | | | | | | | | | | | | |
|--|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|------------------|----|
| 30 Total business/investment miles driven during the year (do not include commuting miles) . . . | (a) Vehicle 1 | | (b) Vehicle 2 | | (c) Vehicle 3 | | (d) Vehicle 4 | | (e) Vehicle 5 | | (f) Vehicle 6 | |
| 31 Total commuting miles driven during the year . . . | | | | | | | | | | | | |
| 32 Total other personal(noncommuting) miles driven . . . | | | | | | | | | | | | |
| 33 Total miles driven during the year Add lines 30 through 32 | | | | | | | | | | | | |
| 34 Was the vehicle available for personal use during off-duty hours? | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | | | | | | | |
| 36 Is another vehicle available for personal use? . . . | | | | | | | | | | | | |

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

| | | |
|---|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? | Yes | No |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . | | |
| 39 Do you treat all use of vehicles by employees as personal use? | | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received? | | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) | | |
| Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles | | |

Part VI Amortization

| | | | | | |
|---|---------------------------------|---------------------------|---------------------|--|-----------------------------------|
| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
| 42 Amortization of costs that begins during your 2012 tax year (see instructions) | | | | | |
| | | | | | |
| | | | | | |
| 43 Amortization of costs that began before your 2012 tax year | | | | 43 | |
| 44 Total. Add amounts in column (f) See the instructions for where to report | | | | 44 | |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Lily Fu Clafee SVP, USCC, SVP, Gnrl Cnsl and CLO | 40 00 6 00 | | | X | | | | 924,278 | 0 | 24,670 |
| Stan M Harrell SVP, USCC, SVP, CFO and CIO | 40 00 7 00 | | | X | | | | 623,272 | 0 | 141,481 |
| David Chavern EVP, USCC, Chief Operating Officer | 40 00 5 00 | | | | X | | | 1,562,190 | 0 | 91,187 |
| Shannon DiBari SVP, USCC, SVP and CAO | 40 00 4 00 | | | | X | | | 587,812 | 0 | 258,348 |
| Robert J Engstrom SVP, USCC, SVP Pol Affrs & Fed Rel | 40 00 | | | | X | | | 452,240 | 0 | 76,980 |
| Bruce Josten EVP, USCC, EVP, Government Affairs | 40 00 | | | | X | | | 1,915,563 | 0 | 242,184 |
| Agnes Warfield-Blanc SVP, USCC, Dev & Fund, ED, Fund, USCCF | 40 00 | | | | X | | | 2,923,120 | 0 | 45,156 |
| Myron A Brilliant EVP, USCC, EVP Int Affairs | 40 00 | | | | | X | | 965,963 | 0 | 152,968 |
| Thomas J Collamore SVP, Comm & Strategy, Cnsl to Pres | 40 00 1 00 | | | | | X | | 1,220,066 | 0 | 46,411 |
| Carl N Grant SVP, USCC, Exec Couns to President | 40 00 | | | | | X | | 807,119 | 0 | 61,935 |
| Karen A Harbert SVP, USCC, Pres & CEO, Energy Inst | 40 00 | | | | | X | | 901,709 | 0 | 43,113 |
| David T Hirschmann SVP, USCC, Pres & CEO, CCMC & GIPC | 40 00 1 00 | | | | | X | | 1,014,207 | 0 | 145,006 |
| Daniel Christman Former Key Employee | 1 00 | | | | | | X | 150,000 | 0 | 7,900 |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| S Dale Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Nicholas J DeIuliis Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Maura W Donahue Senior Council/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Thomas J Donohue President and CEO/Director | 40 00 | X | | X | | | | 5,452,312 | 0 | 30,385 |
| | 3 00 | | | | | | | | | |
| Marcel Dubois Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Michael L Ducker Reg Vice Chair Southeast/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Carrie E Dwyer Reg Vice Chair West/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Patricia Elizondo Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| David R Emery Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Daniel F Evans Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Timothy C Everett Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Robert D Fatovic Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Patrick M Finken Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Martin G Foster Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Lynn L Franzoi Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Mark D French Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Craig L Fuller Reg Vice Chair East/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Walter J Galvin Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| William Garlough Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Bruce A Gates Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Thomas A Gottschalk Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ernest Green Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Shannon L Greene Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James M Guyette Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Winthrop M Hallett Director | 1 00 | X | | | | | | 0 | 0 | 0 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| James L Hebe Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Kevin Herglotz Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James A Hixon Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Scott L Holman Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| John L Hopkins Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| CA Howlett Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Thomas Hutchison Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Gregory Irace Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Harold L Jackson Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Donald M James Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James M Jaska Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Boland T Jones Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Edward Jones Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Jan L Jones Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Paul W Jones Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Fred Kaiser Reg Vice Chair Northwest/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Jackson Kelly Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Philip D Kennedy Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| David E Kepler Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| C Virginia Kirkpatrick Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Paul J Klaassen Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Klaus Kleinfeld Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Laura Lane Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Susan S Lanigan Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Greg Lebedev Director/Consultant | 29 00 1 00 | X | | | | | | 180,000 | 0 | 1,700 |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
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| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| James B Lee Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Michael A Leven Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Stuart L Levenick Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Larry A Liebenow Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| William G Little Reg Vice Chair Great Lakes/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Christopher B Lofgren Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Wes W Lucas Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Tamara L Lundgren Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ted Mathas Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Richard H McClure Reg Vice Chair South Central/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Thomas V McKernan Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Richard L McNeel Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James W Mendenhall Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Rance C Miles Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Darlene M Miller Reg Vice Chair Midwest/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| David L Miller Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Robert S Milligan Senior Council/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Dayton H Molendorp Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ronald T Monford Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Maritza Montiel Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| David Muhlendorf Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Terry F Neimeyer Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Dennis E Nixon Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Brian O'Hara Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Patricia Owen Director | 1 00 | X | | | | | | 0 | 0 | 0 |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Daniel F Packer Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Frederick D Palmer Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Peter Paoli Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| David Peacock Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Manuel J Perez de la Mesa Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Wolfgang G Pordzik Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Randal K Quarles Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Jeffrey K Rageth Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Martin H Richenhagen Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Joseph M Rigby Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James H Roberts Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Tchad Robinson Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James E Rogers Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Matthew K Rose Reg Vice Chair Southwest/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| John Ruan III Chairman of Exec Comm/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Edward B Rust Chairman/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Douglas A Sgarro Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Gerald L Shaheen Senior Council/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Donald J Shepard Senior Council/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Rajendra Singh Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Suzanne Sitherwood Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Edgar L Smith Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Paul S Speranza Senior Council/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Eric A Spiegel Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Charles R Stamp Director | 1 00 | X | | | | | | 0 | 0 | 0 |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Donald J Sterhan Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Frank Sullivan Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Brandon W Sweitzer Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Thomas J Tauke Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Gary J Taylor Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Richard J Tobin Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Mark S Towe Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Leon Trammell Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Robert N Trunzo Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Harold Turner Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Stephen R Van Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Steve Van Andel Vice Chairman/Director | 1 00 | X | | X | | | | 0 | 0 | 0 |
| Frank L VanderSloot Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Roland H Vaughan Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| LeRoy Walker Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Steven F Walker Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Edward Wanandi Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| H Thomas Watkins Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Mark E Watson Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Robert C Weber Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Ronald E Weinberg Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Thomas J Wilson Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Chrstopher C Womack Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Joan Woodward Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| James M Wordsworth Director | 1 00 | X | | | | | | 0 | 0 | 0 |